



(REFERENCE COPY - Not for submission)

Broadcast Equal Employment Opportunity
Program Report

FRN: **0023513849** | File Number: **0000208677** | Submit Date: **01/30/2023** | Call Sign: **WKTV** | Facility ID: **60654** | City: **UTICA** | State: **NY**
Service: **Full Service Television** | Purpose: **EEO Report** | Status: **Received** | Status Date: **01/30/2023** | Filing Status: **Active**

General
Information

Section	Question	Response
Attachments	Are attachments (other than associated schedules) being filed with this application?	No

Licensee
Information

Licensee Name, Type and Contact Information

Applicant	Address	Phone	Email	Applicant Type
WKTV LICENSEE, LLC	3282 NORTHSIDE PARKWAY SUITE 275 ATLANTA, GA 30327 United States	+1 (404) 355-1944	jburgett@wiley.law	LLC

Contact
Representatives

Contact Name	Address	Phone	Email	Contact Type
John M. Burgett , Esq . Wiley Rein LLP	2050 M Street, NW Washington, DC 20036 United States	+1 (202) 719-4239	jburgett@wiley.law	Legal Representative

Common
Stations

Facility Identifier	Call Sign	City	State	Time Brokerage Agreement
60654	WKTV	UTICA	NY	No

Program Report
Questions

Section	Question	Response
Discrimination Complaints	Have any pending or resolved complaints been filed during this license term before any body having competent jurisdiction under federal, state, territorial or local law, alleging unlawful discrimination in the employment practices of the station(s)?	No
Full-time Employees	Does your station employment unit employ fewer than five full-time employees? Consider as "full-time" employees all those permanently working 30 or more hours a week?	No

Additional
Program Report
Questions

Responsibility for Implementation

A broadcast station must assign a particular official overall responsibility for equal employment opportunity at the station. That official's name and title are:

Name	Title
Steve McMurray	

Certification

Question	Response
The undersigned certifies that he or she is (a) the party filing the report, or an officer, director, member, partner, trustee, authorized employee, or other individual or duly elected or appointed official who is authorized to sign on behalf of the party filing the report; or (b) an attorney qualified to practice before the Commission under 47 C. F.R. Section 1.23(a), who is authorized to represent the party filing the report, and who further certifies that he or she has read the document; that to the best of his or her knowledge, information,and belief there is good ground to support it; and that it is not interposed for delay	
Certified Date	01/30 /2023
Certified Title	Chief Executive Officer
Authorized Party Name	Robert S. Prather , Jr. .

Attachments

File Name	Uploaded By	Attachment Type	Description	Upload Status
<u>WKTV 2022 EEO Public File Report.pdf</u>	Applicant	EEO Public File Report		Done with Virus Scan and/or Conversion
<u>WKTV 2023 EEO Public File Report.pdf</u>	Applicant	EEO Public File Report		Done with Virus Scan and/or Conversion
<u>WKTV EEO Narrative Statement.pdf</u>	Applicant	Narrative Statement		Done with Virus Scan and/or Conversion